



KENTUCKY ANNUAL SCHOOL BUS INCIDENT REPORT

SCHOOL YEAR TOTALS – DUE AUGUST 1st

SCHOOL YEAR 2012-2013

SCHOOL DISTRICT All

SCHOOL DISTRICT # All

(PLEASE ENTER THE TOTAL NUMBER OF INCIDENTS PER CATEGORY, FOR THE SCHOOL YEAR)

Do not include section VI of Kentucky Daily School Bus Incident report in this report

Total Number of Incidents 1046

Number of Incidents that were Urban 482 Rural 564

Number of Incidents Occurring in A.M. 494 P.M. 552

Number of Citations issued to School Bus Drivers for Incidents 0

(enter total number of incidents per day/year)

DAY OF WEEK		MONTH OF YEAR			
MON.	<u>233</u>	JAN.	<u>120</u>	JULY	<u>4</u>
TUE.	<u>202</u>	FEB.	<u>96</u>	AUG.	<u>116</u>
WED.	<u>215</u>	MAR.	<u>112</u>	SEPT.	<u>125</u>
THUR.	<u>195</u>	APR.	<u>83</u>	OCT.	<u>139</u>
FRI.	<u>176</u>	MAY	<u>70</u>	NOV.	<u>87</u>
SAT.	<u>21</u>	JUNE	<u>10</u>	DEC.	<u>84</u>
SUN.	<u>4</u>				

SECTION I -- SCHOOL BUS PHYSICALLY INVOLVED

1. TYPE OF INCIDENT (enter totals for each category)

A. between motor vehicles	<u>687</u>	B. noncollision	<u>27</u>	C. pedestrian	<u>2</u>
D. pedal cycle	<u>1</u>	E. railroad train	<u>0</u>	F. fixed object (complete question 2)	<u>327</u>
G. other	<u>38</u>				

Additional Comment / Additional Explanation _____

2. COMPLETE IF FIXED OBJECT INCIDENTS (enter totals for each category)

A. embankment	<u>12</u>	B. building	<u>24</u>	C. tree	<u>44</u>
D. sign	<u>37</u>	E. guardrail	<u>14</u>	F. bridge rail	<u>3</u>
G. fence	<u>19</u>	H. curb	<u>6</u>	I. mailbox	<u>54</u>
J. fire hydrant	<u>6</u>	K. Culvert-headwall	<u>4</u>	L. park vehicle	<u>16</u>
M. utility pole	<u>34</u>	N. median barrier	<u>2</u>	O. other	<u>52</u>

Additional Comment / Additional Explanation _____

3. DID INCIDENT RESULT IN STUDENT AND / OR DISTRICT PERSONNEL INJURY (enter totals for each category)

A. fatality(ies)	<u>2</u>	B. incapacitation injury(ies)-serious	<u>19</u>
C. possible injury(ies)-moderate	<u>33</u>	D. non-incapacitating injury(ies) ,minor	<u>249</u>
E. property damage only	<u>997</u>		

If injury(ies) or fatality(ies) are reported in the above section, then the
INJURY / FATALITY SHEET on **page 7** must be complete.

4. OTHER VEHICLE(S) - DRIVER(S) - OCCUPANTS – PEDESTRIAN(S) (enter totals for each category)

A. fatality(ies)	<u>1</u>	B. incapacitation injury(ies)-serious	<u>7</u>
C. possible injury(ies)-moderate	<u>3</u>	D. non-incapacitating injury(ies) minor	<u>66</u>
E. other	<u>0</u>		

Additional Comments / Additional Explanation _____

5. MANNER OF COLLISION BETWEEN SCHOOL BUS AND OTHER VEHICLE OR OBJECT (enter totals for each category)

A. angle	<u>196</u>	B. head-on	<u>51</u>	C. rear-end	<u>155</u>
D. sideswipe	<u>323</u>	E. backing	<u>243</u>	F. broadside	<u>42</u>
G. other	<u>72</u>				

Additional Comments / Additional Explanation _____

SECTION II BUS DIRECTION ANALYSIS

(enter totals for each appropriate category)

COLLISION WITH PEDESTRIAN

INTERSECTION		NON-INTERSECTION	
A. Bus going straight	<u>0</u>	F. Bus going straight	<u>1</u>
B. Bus turning right	<u>0</u>	G. Bus turning right	<u>0</u>
C. Bus turning left	<u>0</u>	H. Bus turning left	<u>0</u>
D. Bus backing	<u>0</u>	I. Bus backing	<u>0</u>
E. Other action	<u>0</u>	J. Other action	<u>0</u>

COLLISION WITH OTHER VEHICLE

INTERSECTION	
K. Entering at angle, both moving	<u>26</u>
L. Entering same direction, both moving	<u>15</u>
M. Entering opposite direction, both moving	<u>20</u>
N. Entering at angle one vehicle stationary	<u>10</u>
O. Entering same direction one vehicle stationary	<u>18</u>
P. Entering opposite direction one vehicle stationary	<u>6</u>
Q. One vehicle backing at intersection	<u>9</u>
R. Other action	<u>9</u>

NON-INTERSECTION	
S. Same direction, both moving	<u>52</u>
T. Opposite direction, both moving	<u>122</u>
U. One vehicle stopped	<u>271</u>
V. One vehicle backing	<u>61</u>
W. Sideswipe	<u>54</u>
X. Other action	<u>21</u>

ALL OTHER COLLISIONS

INTERSECTIONS	
Y. Fixed object	<u>30</u>
Z. Other type vehicle, i.e. train, pedal cycle, motorcycle	<u>2</u>
AA. Other object, animal	<u>0</u>

NON-INTERSECTIONS	
BB. Fixed object	<u>268</u>
CC. Other type of vehicle, i.e. train, pedal cycle, motorcycle	<u>9</u>
DD. Other object, animal, etc.	<u>27</u>

NON-COLLISIONS

INTERSECTION		NON-INTERSECTION	
EE. Overturn	<u>0</u>	GG. Overturn	<u>1</u>
FF. Other non-collision	<u>2</u>	HH. Other non-collision	<u>48</u>

Additional Comments / Additional Explanation _____

SECTION III GENERAL INFORMATION

(enter totals for each category)

1. TOTAL NUMBER OF LANES ON ROADWAY

A. One lane 89

B. Two lanes 485

C. Three Lanes 36

D. Multilane (four or more) 73

E. Parking lot or area other than roadway 399

Additional Comment / additional Explanation _____

2. AGE OF SCHOOL BUS DRIVER(S) (enter totals for each category)

A. 21 – 30 49 B. 31 – 40 127 C. 41 – 50 229

D. 51 – 60 385 E. OVER 60 292

Additional Comment / Additional Explanation _____

3. DRIVER GENDER (enter totals for each category)

MALE 541 FEMALE 541

Additional Comment / Additional Explanation _____

4. DRIVERS EXPERIENCE DRIVING A SCHOOL BUS (enter totals for each category)

A. less than 6 months 101 B. 6 months to 1 year 84 C. 1 -2 years 103

D. 2-5 years 238 E. 5 -10 years 199 F. over 10 years 357

Additional Comment / Additional Explanation _____

5. WAS BUS DRIVER'S SEAT BELT IN USE WHEN THE INCIDENT OCCURRED?

(enter totals for each appropriated category)

A. yes 1048 B. no 34

Additional Comment / Additional Explanation _____

6. TYPE OF SCHOOL BUS / OTHER VEHICLE (enter totals for each appropriate category)

A. TYPE A 17

B. TYPE B 0

C. TYPE C 766

D. TYPE D 283

E. OTHER 0

Additional Comment / Additional Explanation _____

7. SCHOOL BUS USE AT TIME OF INCIDENT (enter totals for each category)

A. REGULAR ROUTE 865

B. FIELD/ACTIVITY TRIP (SCHOOL RELATED USE) 87

C. SPECIAL EDUCATION USE 58

D. OTHER USE 72

Additional Comment / Additional Explanation _____

8. CONDITION OF ROAD AT TIME OF INCIDENT (enter totals for each category)

A. dry 869 B. wet 200 C. ice 10

D. muddy 5 E. snow packed 3 F. holes or ruts 3

G. under repair 0 H. other (specify) 1

Additional comment / Additional Explanation _____

9. LIGHT CONDITION (enter totals for each appropriate category)

A. dawn 93 B. daylight 852 C. dusk 11

D. dark, artificially illuminated 43 E. dark, not artificially illuminated 83

Additional Comment / Additional Explanation _____

10. WEATHER CONDITION (enter totals for each category)

A. clear 755 B. rain 138 C. fog 20 D. snow 15

E. sleet 1 F. overcast/cloudy 152 G. other 1

Additional Comment / Additional Explanation _____

SECTION IV LOADING/UNLOADING ZONE INCIDENTS

(see definitions)

1. AT THE TIME OF THE INCIDENT, WHERE WAS THE BUS ?

(enter totals for each appropriate category)

A. approaching loading zone 85

B. stopped in loading zone 55

C. leaving loading zone 111

D. not in sight of loading zone 831

Additional Comment / Additional Explanation _____

2. WAS / WERE THE PUPIL(S) ? (enter totals for each category)

A. hit by the bus 1

B. hit by another vehicle 1

C. on the bus 772

D. other 1

Additional Comment / Additional Explanation _____

3. LOCATION OF INJURED PUPIL(S) (enter totals for each category)

A. on the side of the road 1

B. in the roadway 1

C. on the sidewalk 0

D. on the bus 144

E. other 1

Additional Comment / Additional Explanation _____

4. NUMBER INJURED (Complete Part V of Injury / Fatality Tally Sheet for Students and School Personnel)

SECTION V - INJURY / FATALITY TOTALS FOR STUDENTS AND SCHOOL PERSONNEL

ON BOARD BUS						OFF BUS LOADING / UNLOADING ZONE				
	FALTALITIES		SERIOUS	MODERATE	MINOR	FALTALITIES		SERIOUS	MODERATE	MINOR
AGE	M	F	ALL	ALL	ALL	M	F	ALL	ALL	ALL
UNDER 3	0	0	0	0	2	0	0	0	0	0
3	1	1	3	1	4	0	0	0	0	0
4	0	0	0	0	1	0	0	0	0	1
5	0	0	0	0	6	0	0	0	0	0
6	0	0	0	0	9	0	0	0	0	0
7	0	0	0	0	16	0	0	0	0	0
8	0	0	1	0	22	0	0	0	0	0
9	0	0	0	1	25	0	0	0	0	0
10	0	0	0	1	15	0	0	0	0	0
11	0	0	4	4	27	0	0	0	0	1
12	0	0	2	2	29	0	0	0	0	0
13	0	0	3	6	24	0	0	0	0	0
14	0	0	2	5	15	0	0	0	0	1
15	0	0	0	1	8	0	0	0	0	0
16	0	0	1	3	10	0	0	0	0	0
17	0	0	0	1	1	0	0	0	0	0
18	0	0	0	1	3	0	0	0	0	0
OVER 18	0	0	0	0	5	0	0	0	0	0
DRIVER	0	0	3	7	26	0	0	0	0	0
OTHER	0	0	0	0	1	0	1	7	3	63
TOTALS	1	1	19	33	249	0	1	7	3	66

REMARKS _____

Report submitted by

SIGNATURE _____ NAME (PRINT) _____

TRANSPORTATION DIRECTOR /DESIGNEE _____ DATE _____